



TELLER COUNTY BUILDING DEPARTMENT
APPLICATION FOR DEMOLITION PERMIT

PHONE NUMBER: (719) 687- 3048 FAX NUMBER: (719) 687-5256

APPLICATION MUST INCLUDE ALL OF THE FOLLOWING
INFORMATION & A MAP TO THE PROPERTY:

*******A FINAL INSPECTION IS REQUIRED*******

Have you contacted the State Dept. of Health? YES__ NO__
(Please see attached state requirements)

PERMIT FEE: \$50.00
CASH/CHECK: _____ BY: _____

TYPE OF STRUCTURE: _____

PROPERTY OWNER'S NAME: _____

OWNER'S MAILING ADDRESS: _____
STREET # & NAME CITY

STATE ZIP PHONE #: _____

PROPERTY STREET ADDRESS: _____

PROPERTY LEGAL DISCRIPTION OR PARCEL I.D. #: _____

LOT BLOCK SUBDIVISION FILING

CONTRACTOR: _____

TELLER COUNTY LICENSE #: _____ PHONE #: _____

DESCRIPTION OF PROJECT: _____

DECSRIPTION OF DEBRIS: _____

DISPOSITION OF DEBRIS (ie: Burn, haul to landfill, etc. If debris is hauled off site give location of disposal, name & phone number of person responsible for hauling & disposal.): _____

- **A demolition plan shall be submitted showing the structure before and after demolition**
- **If this demolition involves structural elements; a letter from a Colorado Registered Design Professional is required approving the demolition and must be attached to this application.**

Property Owner Signature
(If more than one owner, all owners must sign application)

Date

Contractor Signature

Date

*****Disposal of any Hazardous Materials must be completed in accordance with State Health Department Requirements.*****